



| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) 102182-0036 | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|------------|--|-----------|--|------------|-------------------------|--|--|----------|---------|----|--|----------|----------|-----------|---|----------|----------|----|--|------------|----------|----|--|------------|------------|----|
| Application Number 10/802,497-Conf. #3969 | | Filed March 16, 2004 | | | | | | | | | | | | | | | | | | | | | | | | | |
| For GLUTAMIC ACID DECARBOXYLASE (GAD) BASED DELIVERY SYSTEM | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Art Unit 1614 | | Examiner Not Yet Assigned | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table border="1"><thead><tr><th></th><th><u>Fee</u></th><th><u>Small Entity Fee</u></th><th></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$110.00</td><td>\$55.00</td><td>\$</td></tr><tr><td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$420.00</td><td>\$210.00</td><td>\$ 420.00</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$950.00</td><td>\$475.00</td><td>\$</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$1,480.00</td><td>\$740.00</td><td>\$</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$2,010.00</td><td>\$1,005.00</td><td>\$</td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>141449</u>. I have enclosed a duplicate copy of this sheet.</p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input type="checkbox"/> attorney or agent of record. Registration Number _____ <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>51,177</u></p> <p><u>[Signature]</u> <u>September 20, 2004</u> Signature Date <u>Jasbir Sagoo, Ph.D.</u> <u>(617) 439-2000</u> Typed or printed name Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p> | | | | | <u>Fee</u> | <u>Small Entity Fee</u> | | <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$110.00 | \$55.00 | \$ | <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$420.00 | \$210.00 | \$ 420.00 | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$950.00 | \$475.00 | \$ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1,480.00 | \$740.00 | \$ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2,010.00 | \$1,005.00 | \$ |
| | <u>Fee</u> | <u>Small Entity Fee</u> | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$110.00 | \$55.00 | \$ | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$420.00 | \$210.00 | \$ 420.00 | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$950.00 | \$475.00 | \$ | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1,480.00 | \$740.00 | \$ | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2,010.00 | \$1,005.00 | \$ | | | | | | | | | | | | | | | | | | | | | | | | |

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| Two Month Request for Extension of Time Under 37 CFR 1.136(a) | |
| I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. | |
| Dated: September 20, 2004 | Signature: <u>[Signature]</u> (Jasbir Sagoo, Ph.D.) |